U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 6/72	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name Richard J Messina	Name Laborers' Local Union #17
	Labor Organization File Number 047-525
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 543 Lattintown Road	Street 451A Little Britain Road
City Marlboro	City Newburgh
State New York ZIP Code +4 12542	State New York ZIP Code + 4 12550
5. Position in labor organization. Organizer, Executive Board	
Enter appropriate data below If, during the past fiscal year, you or your spo	use or minor child directly or indirectly had any of the following interests
(except as specified in the exclu	isions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., If any	
37.00.200, 0.0000	7.b. Amount.
Street	
City	
State ZIP Code + 4	No marked and describe a size of the Control of the
Siar	nature
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed	On 08/12/2005 845-236-7142
Organico / R	Date Telephone Number

	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
9. Business deals with: a. Labor Organiza b. Trust c. Employer	alion	
11.a. Nature of such deal	ling.	
11.b. Approximate dollar val 12.a. Nature of interest he Trustee Holiday D	eld or income received.	
12.b. Amount.	\$75	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
14.a. Nature of payment.		
	erwise dealing with the businestively seeking to represent, or ndirectly to, or otherwise ization is interested. 9. Business deals with:	

Name of Person Filing Richard Messina	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any),	9. Business deals with:
Name Laborers' Local 17 Benefit Fund	
Trade Name, if any:	a. Labor Organization
P.O. Box, Bidg., Room No., if any	b. Trust c. Employer
Street 451B Little Britain Road	c. Employer
City Newburgh	
State New Mexico ZIP Code + 4 12550	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name .	Pension, Health and Welfare, Annuity, LECET and Training Funds.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	11.b. Approximate dollar value of such dealing.
* Control of the Cont	12.a. Nature of interest held or income received.
State ZIP Code + 4	Yearly Holiday Dinner meeting.
	Dinner
	12.b. Amount. \$60
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.
(including trade name, if any).	
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.

Name of Person Filling Richard Messina	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Laborers', Local 17 LECET Fund	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street 451B Little Britain Road	
City Newburgh	
State New York ZIP Code + 4 12550	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Laborers Empolyers Cooperation Education Trust. Labor management fund.
Trade Name, if any:	Helps promote union contractors and union labor.
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Attended Bassett Healthcare golf outing. 1 round of golf shirt 3 balls lunch
	12.b. Amount. \$1.25
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name ·	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
the state of the s	14 b Amount of powerst
13 h Is the Business on Employer Consultant 2	14.b. Amount of payment.

Name of Person Filing Richard Messina	File Number U-
B. Held an interest in dr derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or individually dealing with your labor organization or with a trust in which your labor organization.	vise dealing with the business vely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Laborers' Local 17 LECET Fund	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any	· · · · · · · · · · · · · · · · · · ·
Street 451B Little Britain Road	c. Employer
City Newburgh	
State New York ZIP Code + 4 12550	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Laborers Empolyers Cooperation Education Trust. Labor management fund.
Trade Name, if any:	Helps promote union contractors and union labor. Habitat for Humanity is a worthy cause.
P.O. Box, Bldg., Room No., if any	
Street	
City	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received. Attended charity golf outing for Habitat for
State ZIP Code + 4	Humanity.
	1 round of golf shirt
	3 balls
	lunch
	12.b. Amount. \$100
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13 h Is the Business an Employer ar Consultant 2	14.b. Amount of payment.

Name of Person Filing Richard Messina	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or included the your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
Name and address of Business (including trade name, if any).	9. Business deals with:
Name Laborers' Local 17 LECET Fund	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bidg., Room No., if any	c. Employer
Street Laborers' Local 17 LECET Fund	\
City Newburgh	
State New York ZIP Code + 4 12550	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Laborers Empolyers Cooperation Education Trust. Labor management fund.
Trade Name, if any:	Helps promote union contractors and union labor.
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Attended Kingston Hospital golf outing.
Rad Garage as a count of codes admitted and companies codes admitted and companies of the companies and codes admitted admitted and codes admitted admitted admitted and codes admitted admitt	1 round of golf
	3 balls lunch
	12.b. Amount. \$75
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13 h Is the Rusiness an Employer or Consultant 2	14.b. Amount of payment.

Name of Person Filing Richard Messina	rile number o-	
B. Held an interest in or derived income or economic trenefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or included the properties of the p	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Laborers' Local 17 LECET Fund Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust c. Employer	
Street Laborers' Local 17 LECET Fund		
City Newburgh		
State New York ZIP Code + 4 12550		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Laborers Empolyers Cooperation Education Trust.	
Trade Name, if any:	Helps promote union contractors and union labor.	
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing.	
City	12.a. Nature of interest held or income received.	
State ZIP Ccde + 4	Attended Orange Regional Medical Center golf outing. 1 round of golf shirt 3 balls lunch gift	
	12.b. Amount. \$1.25	
	The interest of the control of the c	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13 h is the Rusiness an Employer or Consultant 2	14.b. Amount of payment.	

me of Person Filing Richard Messina		File Number 0-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the busines wely seeking to represent, or irectly to, or otherwise	:5
8. Name and address of Business (including trade name, if any). Name Laborers' Local 17 LECET Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 451B Little Britain Road City Newburgh State New York ZIP Code +4 12550	9. Business deals with: a. Labor Organiza b. Trust c. Employer	ation
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	ing.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Laborers Empolyers Labor management f	Cooperation Education Trust.
Street		
Virtualines administration to the second distriction of the second dis	11.b. Approximate dollar val	ue of such dealing.
State ZIP Code + 4	12.a. Nature of interest he Attended Saint Lul 1 round of golf shirt 3 balls lunch gift	ld or income received. se's Cornwall Hospital golf outing.
		Control of the Contro
	12.b. Amount.	\$1.25
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	14.a. Nature of payment.	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

Name of Person Filing Richard Messina	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or individualing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Laborers' Local 17 LECET Fund Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 451B Little Britain Road City Newburgh State New York ZIP Code+4	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. Laborers Empolyers Cooperation Education Trust. Labor management fund.
Street City ZIP Ccde + 4	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attended Teamsters Local 445 Scholarship golf outing. 1 round of golf 3 balls lunch gift
	12.b. Amount. \$1.00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Ccde + 4	14.a. Nature of payment.
13 h Is the Business an Employer or Consultant 2	14.b. Amount of payment.

August 12, 2005



U. S. Department of Labor **Employee Standards Administration** Office of Labor-Management Standards 200 Constitution Avenue, NW Room N-5616 Washington, D.C. 20210

RE: Form LM-30 Filing for Richard J. Messina, Labor Organization File no. 047-525

Dear Sir or Madam:

The following pages are amended LM 30 Forms. Please disregard any forms dated 8/05/2005. All previously filed forms have been filled out incorrectly. These amended forms reflect my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department.

Sincerely,

Richard J. Messina

LISA M. ARGENIO Notary Public, State of New York No. 4935186

Qualified in Orange County
Commission Expires May 31